

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ch.</i>	<i>11</i>	<i>7/29/08</i>
O.I.P.E. CLASSIFIER	<i>Ch.</i>	<i>71423</i>	<i>10-12-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	12/5/0
2	08/03/03
3	✓ ✓ ✓ ✓
4	✓ ✓ ✓ ✓
5	✓ ✓ ✓ ✓
6	✓ ✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet her

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BEST AVAILABLE COPY